

Combining Elements of Clinical Effectiveness and Implementation Research Trials: Hybrid Trial Designs

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Outline

- **Brief review of Hybrid Sessions:**
 - **Cyberseminar: October, 2009**
 - **Implementation Workshop: Denver, July, 2010**
- **Audience questions: design challenges and/or**
 - **Exercise in hybrid design**



Why Hybrid Designs?

Hybrid: Something of mixed origin or composition

- **In this case: Effectiveness + Implementation trial components**

Rationale:

- **To speed throughput from clinical evidence to public health impact**
- **To optimize knowledge accrual: “clinical intervention x implementation” interaction effects**



Some Terms Defined

- **Clinical* Intervention:** Clinical initiative, manipulation, change to be introduced into a healthcare venue
 - e.g.: collaborative care for depression, early aspirin for MI
- **Implementation Intervention:** “A single method or technique to facilitate change” (QUERI Glossary)
 - e.g.: automated clinical reminder, performance feedback
- **Implementation Strategy:** “An integrated set, bundle, or package of [implementation] interventions” (QUERI Glossary)

*Includes *health promotion* and *delivery system* interventions also...



Clinical Effectiveness Research

- **Effectiveness Research is focused on:**
 - **Follow efficacy research trials**
 - **Health outcomes**
 - **Process measures secondary (e.g.: quality indices, provider behavior)**
 - **Level of analysis typically patient; more recently clinical unit**
 - **Balance of external & internal validity favors external: “real world” settings, larger and more diverse samples**



Implementation Research

- **Implementation Research is focused on:**
 - **Enhancing uptake of established clinical interventions**
 - **Outcomes are usually what clinical trialists consider “process” measures (e.g.: rates of adoption, quality indices)**
 - **Level of analysis typically provider, clinical unit, or facility**
 - **Clinical outcomes data considered not needed since intervention is established (e.g., multiple RCTs in various settings, inclusion in clinical practice guidelines)**



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- **The alternative to the fantasy: Endless RCTs of innumerable tweaks for countless specific applications...each followed by an implementation study.**

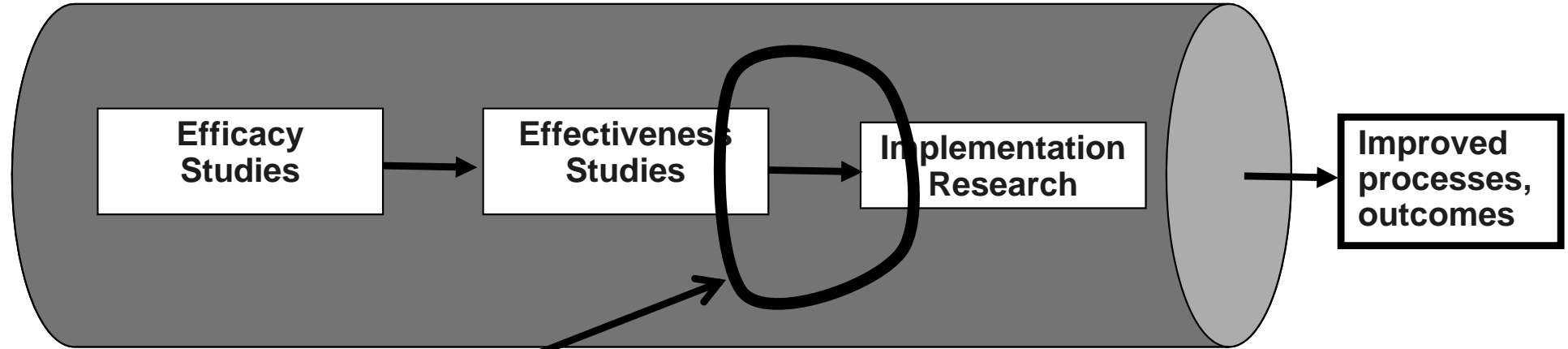


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- **The alternative to the fantasy: Endless RCTs of innumerable tweaks for countless specific applications...each followed by an implementation study.**
- **The cost: Long loops; no “interaction” effects**

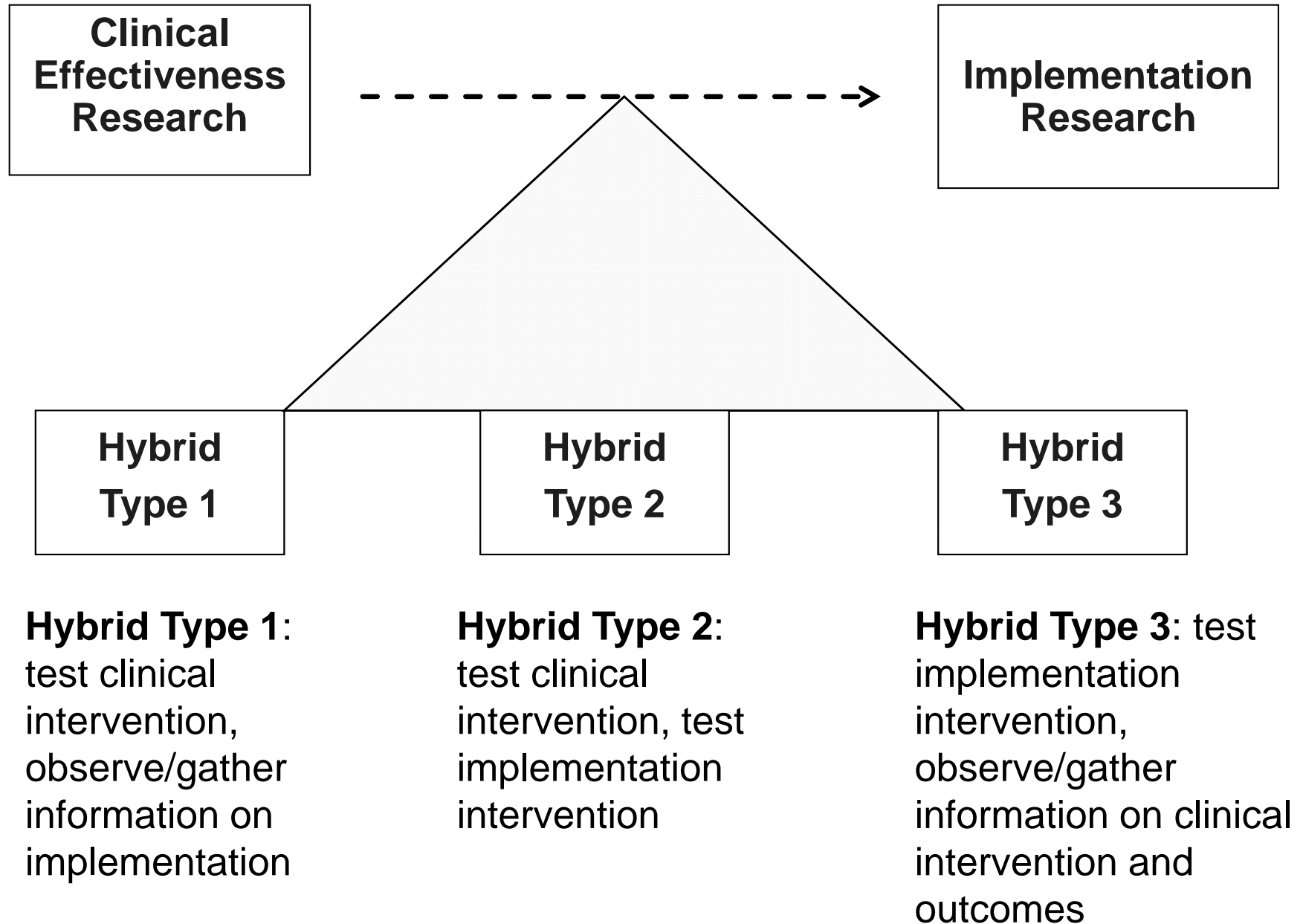


“Newer” Clinical Research-Implementation Pipeline



Spatially speaking, hybrid designs go here...

First Look at the Types



Another Look...

Intervention Focus		Implementation	
		Yes	No
Clinical	Yes	Hybrid Type II	Hybrid Type I
	No	Hybrid Type III	Observational Research

Hybrid Type 1: test clinical intervention, observe/gather information on implementation

Hybrid Type 2: test clinical intervention, test implementation intervention

Hybrid Type 3: test implementation intervention, observe/gather information on clinical intervention and outcomes

(We'll discuss *randomization* a bit later...)



More In-Depth: Hybrid Type 1

- **Definition (again):**
 - Test clinical intervention, observe/gather information on implementation
- **Description:**
 - Includes *process evaluations* of implementation during clinical effectiveness trials
- **Indications:**
 - Some effectiveness data available, likely to move toward implementation



More In-Depth: Hybrid Type 3

- **Definition (again):**
 - Test implementation strategy, observe/gather information on clinical intervention and outcomes
- **Description:**
 - Includes *health outcome evaluations* during implementation trials
- **Indications:**
 - Robust clinical intervention data available but effects suspected to be “vulnerable” during implementation trial (i.e., most of the time).



More In-Depth: Hybrid Type 2

- **Definition (again):**
 - **Test clinical intervention & test implementation intervention**
- **Description:**
 - **Two “sets” of data: clinical (patient- or clinic-level) and implementation (provider-, clinic-, site-level**
- **Indications:**
 - **Robust clinical intervention data available**
 - **Implementation research likely to be preliminary, e.g., feasibility pilot or small-scale efficacy-like trial**



Some Important Questions to Address with Hybrid Designs

- **What intervention or implementation barriers or problems emerge?**
- **What changes to implementation strategy, or clinical intervention, could be made to improve uptake?**
- **Are any parts of the implementation strategy unnecessary?**
- **In what ways are clinical intervention effects sensitive to implementation process factors?**



A Critical Hybrid Component: Evaluating the Trial Process

- **Process Evaluation:**
 - Identify influences on process of implementation or clinical intervention prior to and/or during study
 - No data fed back during study
 - Typical of Type 1 designs
- **Formative Evaluation:**
 - Identify influences on process of implementation or clinical intervention prior to and during study
 - Data used to enhance implementation or clinical intervention processes during study
 - Typical of Types 2 & 3 designs



Some Hybrid Design Considerations

- Specific research questions / aims
- What hybrid *type* will you use?
- Randomization or quasi-experimental or both?
- System, population, sampling frame
- Domains of interest / measures to gather
- Unit(s) of analysis
- Study duration & tasks:
 - Pre-implementation
 - Implementation of the clinical intervention
 - “Post”-implementation



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